2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000110261

Entity Name: STAHLMAN-ENGLAND IRRIGATION, INC.

FILED Mar 24, 2009 Secretary of State

Current Principal Place of Business: 2063 TRADE CENTER WAY			New Principal Place of Business:		
NAPLES, FL 341096244 Current Mailing Address:				New Mailing Address:	
2063 TRADE CENTER WAY NAPLES, FL 341096244				ng Address.	
FEI Number:	59-3614806	FEI Number Applied For () FEI Num	nber Not Appli	icable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent: COSTELLO, TRUMAN J 12670 NEW BRITTANY BLVD #101 FT MYERS, FL 33907 US					
The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.					
SIGNATURE:					
	Electronic	Signature of Registered Agent		Date	
Election Campaign Financing Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITION	IS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	CTD ()E ENGLAND, JAME 15687 VILLORES NAPLES, FL 34	SSI WAY	Title: Name: Address: City-St-Zip:	CTD (X) Change () Addition ENGLAND, JAMES H 15687 VILLORESI WAY NAPLES, FL 34110	
Title: Name: Address: City-St-Zip:	STAHLMAN, MAR	D COURT, #1604	Title: Name: Address: City-St-Zip:	VCSD (X) Change () Addition STAHLMAN, MARK 1456 ANHINGA POINT NAPLES, FL 34105	
Title: Name: Address: City-St-Zip:	PD () [DELGADO, WILL 1773 SANCTUAR NAPLES, FL 34	Y POINTE CT	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V () [DEHAY, MICHAE 3715 ACORN ST NORTH PORT, F	L J REET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V ()[HALL, STEVEN N 2251 WEST END LEHIGH ACRES,	COURT	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	HERSHEY-CARD	AY DRIVE SOUTH	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JH ENGLAND CHMN 03/24/2009